

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P95000094685

1. Entity Name  
USA TIRE, INC.



FILED

07 FEB 15 AM 10:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
7051 ALICO RD.  
FORT MYERS, FL 33912 US

Mailing Address  
7011 ALICO RD. #5  
FORT MYERS, FL 33912 US

2. Principal Place of Business - No P.O. Box #  
5461 Harborage Drive  
Suite, Apt. #, etc.

3. Mailing Address  
5461 Harborage Drive  
Suite, Apt. #, etc.

City & State  
Fort Myers, FL

City & State  
Fort Myers, FL

Zip  
33908

Country  
USA

Zip  
33908

Country  
USA



REINSTATEMENT

4. FEI Number  
65-0632352

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VASBINDER, BUDDY E.  
7011 ALICO ROAD #5  
FT. MYERS, FL 33912-2525

7. Name and Address of New Registered Agent

Name  
Vasbinder, Buddy E.

Street Address (P.O. Box Number is Not Acceptable)  
5461 Harborage Drive

City  
Fort Myers

FL

Zip Code  
33908

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Buddy E. Vasbinder 2/12/07

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$900.00

800088709018  
02/19/07--01006--025 \*\*908.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VASBINDER, BUDDY E 5461 HARBORAKE DR. FORT MYERS, FL 33908	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	5461 Harborage Drive Fort Myers, FL 33908	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE Buddy E. Vasbinder 2/12/07 (239) 910-1855

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

K. Eckel FEB 16 2007